## BEST AVAILABLE COPY

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO								14948					
Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL	
TOTAL CLAIMS			6		A.75		ſ	RATI	Ε	FEE		RATE	FEE
FOR ·			NUMBER FILED		NUMBER EXTRA		Ī	BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		· Ø			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=			OR	X80=	160
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=			OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column							L	TOTA	AL		OR	TOTAL	27 o
	CLAIMS AS AMENDED - PART II										9	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMAI	LLE	ENTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=	=		OR	X80=	-
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			405		·		+270=	
								+135	ل		OR	TOTAL	
							A	ADDIT. F			OR	ADDIT. FEE	
<u></u>	FI STANDEN	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 6			ADDI	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=	_		OR	X80=	
	FIRST PRESE	ULTIPLE DEF	TIPLE DEPENDENT CLAIM										
								+135			OR	+270=	
							Δ	TOT ADDIT. F	EE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9:	= ]		OR	X\$18=	
ME	Independent	•	Minus	***		=		X40=				X80=	
	FIRST PRESENTATION OF MULTIPLE DEPE				T CLAIM		<b> </b>		-		OR		
+135=											OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
,,,,	ii the "Highest Nu The "Highest Num	mber Previously P ober Previously Pa	id For" (Total o	o SPACE r Independ	is less tha dent) is the	in 3, enter 3. highest numbe	er four	nd in the	app	propriate bo	x in co	lumn 1.	